## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:				Docket Number: 1063		
My residence, post office one name is listed below) which a patent is sought ounless the following is che	n the invention entitled "h	ire as stated below int inventor (if plural Auffler Having A Baf	next to my name. I believe names are listed below) of fle With Angled Plates" the	l am the original, fi (the subject matter specification of wh	irst and sole inventor (if only which is claimed and for tich is attached hereto	
was filed on		as United States	Application Number or PC	T international App	olication Number	
and was amended on					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Federal Regulations, sec.	nove. I acknowledge the 1.56. I hereby claim fore tificate listed below and h	duty to disclose info ign priority benefits have also identified l	ormation which is material tunder Title 35. United State	to patentability as o	claims, as amended by any defined in Title 37, Code of of any foreign application(s) ventor's certificate having a	
Prior Foreign Application(s)			Priority Claimed		• (	
(Number)	(Country)	(0	(Day/Month/Year Filed) (Day/Month/Year Filed)		Yes No	
(Number)	(Country)	(D			No	
paragraph of Title 35, Unite	ed States Code, sec. 112 al Regulations, sec. 1.56 e of this application.	, I acknowledge the	duty to disclose informatio lable between the filing da	n which is material	nner provided by the first to patentability as defined ication and the national or pandoned)	
pplication Number) (Filing		iling Date)	(Status: pa	(Status: patented, pending, abandoned)		
connected therewith: Doni 53005 I hereby declare that all st believed to be true; and fi	ald J. Ersler Reg. #3875 atements made herein o	<ol> <li>Telephone No. ()</li> <li>f my own knowledg</li> <li>nts were made with</li> </ol>	262) 785-0160 Address: 1	725 Garvens Aven tements made on Il false statements	ent and Trademark Office ue, Brookfield, Wisconsin information and belief are and the like so made are illful false statements	
purishable by line or linbis may jeopardize the validity	of the application or any	patent issued thereo	n.			
Full name of sole or first inv Inventor's Signature Residence: Neenah, Wiso Post Office Address: 312 F	onsh	un _	Zelinski Date <u>8-7</u> Citizenship:	98-55 USA		
Full name of sole or first int Inventor's Signature Residence Post Offico Address	ventor (given name, famil	y name)	Date	Ditizenship		
Additional Inventors ar	o being named on separa	ntely number sheets	attached hereto.			